

NORTHERN WI CENTER FOR D.D.

2820 EAST PARK AVENUE, P.O. BOX 340

CHIPPEWA FALLS 54729 Phone: (715) 723-5542

Operated from 1/1 To 12/31 Days of Operation: 365

Operate in Conjunction with Hospital? No

Number of Beds Set Up and Staffed (12/31/03): 170

Total Licensed Bed Capacity (12/31/03): 180

Number of Residents on 12/31/03: 158

Ownership:

Highest Level License:

Operate in Conjunction with CBRF?

Title 18 (Medicare) Certified?

Title 19 (Medicaid) Certified?

Average Daily Census:

State

FDDs

No

No

Yes

168

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/03)				Length of Stay (12/31/03)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		1.9
Supp. Home Care-Personal Care	No					1 - 4 Years		7.6
Supp. Home Care-Household Services	No	Developmental Disabilities	100.0	Under 65	92.4	More Than 4 Years		88.6
Day Services	No	Mental Illness (Org./Psy)	0.0	65 - 74	4.4			----
Respite Care	No	Mental Illness (Other)	0.0	75 - 84	2.5			98.1
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	0.6	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	0.0	Full-Time Equivalent		
Congregate Meals	No	Cancer	0.0		----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	0.0		100.0	(12/31/03)		
Other Meals	No	Cardiovascular	0.0	65 & Over	7.6	-----		
Transportation	No	Cerebrovascular	0.0		-----	RNs		6.5
Referral Service	No	Diabetes	0.0	Gender	%	LPNs		13.5
Other Services	Yes	Respiratory	0.0		-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	0.0	Male	61.4	Aides, & Orderlies		
Mentally Ill	No		----	Female	38.6			
Provide Day Programming for			100.0		----			
Developmentally Disabled	Yes				100.0			

Method of Reimbursement

		Medicare (Title 18)		Medicaid (Title 19)		Other		Private Pay		Family Care		Managed Care						Total Resi- dents	% Of All
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%		
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Intermediate	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Dev. Disabled	---	---	---	158	100.0	529	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	158	100.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Total	0	0.0		158	100.0		0	0.0		0	0.0		0	0.0		0	0.0	158	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/03				
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Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total Number of
Private Home/No Home Health	0.0	Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Residents
Private Home/With Home Health	0.0	Bathing	4.4	32.3	63.3	158
Other Nursing Homes	0.0	Dressing	30.4	29.1	40.5	158
Acute Care Hospitals	0.0	Transferring	60.1	7.0	32.9	158
Psych. Hosp.-MR/DD Facilities	100.0	Toilet Use	41.8	26.6	31.6	158
Rehabilitation Hospitals	0.0	Eating	51.3	17.1	31.6	158
Other Locations	0.0	*****				
Total Number of Admissions	7	Continence	%	Special Treatments	%	
Percent Discharges To:		Indwelling Or External Catheter	0.0	Receiving Respiratory Care		3.8
Private Home/No Home Health	0.0	Occ/Freq. Incontinent of Bladder	59.5	Receiving Tracheostomy Care		0.0
Private Home/With Home Health	0.0	Occ/Freq. Incontinent of Bowel	48.1	Receiving Suctioning		1.3
Other Nursing Homes	0.0			Receiving Ostomy Care		5.7
Acute Care Hospitals	0.0	Mobility		Receiving Tube Feeding		5.1
Psych. Hosp.-MR/DD Facilities	17.4	Physically Restrained	27.8	Receiving Mechanically Altered Diets		74.7
Rehabilitation Hospitals	0.0					
Other Locations	73.9	Skin Care		Other Resident Characteristics		
Deaths	8.7	With Pressure Sores	0.0	Have Advance Directives		5.7
Total Number of Discharges		With Rashes	0.6	Medications		
(Including Deaths)	23			Receiving Psychoactive Drugs		70.9

Selected Statistics: This FDD Facility Compared to Similar Facilities & Compared to All Facilities					

	This Facility	FDD Facilities		All Facilities	
	%	% Ratio		% Ratio	

Occupancy Rate: Average Daily Census/Licensed Beds	77.7	89.6	0.87	87.4	0.89
Current Residents from In-County	5.7	33.5	0.17	76.7	0.07
Admissions from In-County, Still Residing	0.0	11.3	0.00	19.6	0.00
Admissions/Average Daily Census	4.2	21.3	0.20	141.3	0.03
Discharges/Average Daily Census	13.7	25.0	0.55	142.5	0.10
Discharges To Private Residence/Average Daily Census	0.0	11.4	0.00	61.6	0.00
Residents Receiving Skilled Care	0.0	0.0	0.00	88.1	0.00
Residents Aged 65 and Older	7.6	15.3	0.50	87.8	0.09
Title 19 (Medicaid) Funded Residents	100.0	99.3	1.01	65.9	1.52
Private Pay Funded Residents	0.0	0.5	0.00	21.0	0.00
Developmentally Disabled Residents	100.0	99.4	1.01	6.5	15.40
Mentally Ill Residents	0.0	0.3	0.00	33.6	0.00
General Medical Service Residents	0.0	0.3	0.00	20.6	0.00
Impaired ADL (Mean)*	51.4	53.1	0.97	49.4	1.04
Psychological Problems	70.9	50.1	1.41	57.4	1.24
Nursing Care Required (Mean)*	11.4	11.0	1.03	7.3	1.55